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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>		Attorney Docket No. <input type="text" value="END -5284"/>									
First Inventor: Trevor Speeg et al. Title: MEDICAL APPARATUS AND METHOD USEFUL FOR POSITIONING ENERGY DELIVERY DEVICE											
I hereby certify that this correspondence is being deposited today with the United States Postal Service as Express Mail – Post Office to Addressee in an envelope addressed to: Commissioner for Patents, MS-Patent Application, PO Box 1450, Alexandria, VA 22313. Name: <i>Linda F. Hansen</i> Date: March <u>12</u> , 2004 Linda F. Hansen											
(only for new nonprovisional applications under 37 CFR 1.53(b))		Express Mail Label No. <input type="text" value="ER 593 022 883 US"/>									
<b>APPLICATION ELEMENTS</b>		<b>ADDRESSED TO:</b> Commissioner for Patents MS Patent Application PO Box 1450 Alexandria, VA 22313-1450									
<p>See MPEP Chapter 600 concerning utility patent application contents.</p> <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)  <i>(submit an original and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status.</p> <p>3. <input checked="" type="checkbox"/> Specification Total Pages: 33  <i>(Preferred arrangement set forth below)</i></p> <p style="margin-left: 20px;">X Descriptive Title of the Invention</p> <p style="margin-left: 20px;">X Cross Reference to Related Applications</p> <p style="margin-left: 20px;">- Statement Regarding Fed sponsored R&amp;D</p> <p style="margin-left: 20px;">- Reference to sequence listing, a table, or a computer program listing appendix</p> <p style="margin-left: 20px;">X Background of the Invention</p> <p style="margin-left: 20px;">X Brief Summary of the Invention</p> <p style="margin-left: 20px;">X Brief Description of the Drawings <i>(if filed)</i></p> <p style="margin-left: 20px;">X Detailed Description</p> <p style="margin-left: 20px;">X Claim(s)</p> <p style="margin-left: 20px;">X Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) <i>(35 USC 113)</i> 10 Total Sheets</p> <p>5. Oath or Declaration [4 Total Pages]</p> <p style="margin-left: 20px;">a. <input checked="" type="checkbox"/> EXECUTED</p> <p style="margin-left: 20px;">b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))  <i>(for continuation/divisional with Box 18 completed)</i></p> <p style="margin-left: 20px;">i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b>  Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>18. <input type="checkbox"/> If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-Part (CIP) of prior application No _____</p> <p>Prior application information: Examiner: _____ Group Art Unit: _____</p> <p>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p> <p>19. CORRESPONDENCE ADDRESS</p> <p><input checked="" type="checkbox"/> Customer Number or Bar Code Label <b>000027777</b> or <input type="checkbox"/> Correspondence Address below</p> <p>Name: Philip S. Johnson, Esq.</p> <p>Address: Johnson &amp; Johnson One Johnson &amp; Johnson Plaza New Brunswick, NJ 08933-7003 USA</p> <p>20. TELEPHONE CONTACT: Gerry S. Gressel Please direct all telephone calls or telefaxes to:  Telephone: (513) 337-3535 Fax: (513) 337-8489</p> <p>21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED</p> <table border="1" style="width: 100%;"> <tr> <td>NAME</td> <td><i>Gerry S. Gressel</i></td> <td>Reg. No. 34,342</td> </tr> <tr> <td>SIGNATURE</td> <td><i>Gerry S. Gressel</i></td> <td></td> </tr> <tr> <td>DATE</td> <td>March <u>12</u> 2004</td> <td></td> </tr> </table>			NAME	<i>Gerry S. Gressel</i>	Reg. No. 34,342	SIGNATURE	<i>Gerry S. Gressel</i>		DATE	March <u>12</u> 2004	
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## FEE TRANSMITTAL

Complete if Known

Application Number	
Filing Date	March 12, 2004
First Named Inventor	Trevor Speeg et al.
Group Art Unit	
Examiner Name	
Attorney Docket Number	END-5284

## FEE CALCULATION

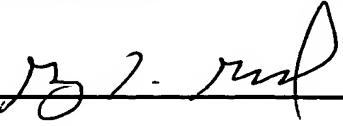
## CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$770.00
TOTAL CLAIMS	- 20 =	0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	- 3 =	0	x 86.00	\$ 0/00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$280.00	
			TOTAL FEES	\$770.00

## METHOD OF PAYMENT

Please charge Deposit Account No. 10-0750/END-5284/GSG in the amount of \$770.00.

The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/END-5284/GSG. Three copies of this sheet are enclosed.

SUBMITTED BY:			Complete (if applicable)
Typed or Printed Name	Gerry S. Gressel		Reg. No. 34,342
Signature		Date: March 12 2004	Deposit Account No. 10-0750